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10/822,697	04/13/2004 RULE	604	3763	BSX-201.7-CONT.

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**** CONTINUING DATA *******

This application is a CON of 10/219,347 08/16/2002 PAT 6,743,217
 which is a CON of 09/541,931 04/03/2000 PAT 6,547,758
 which is a CON of 09/356,685 07/20/1999 PAT 6,443,924
 which is a CON of 09/154,834 09/17/1998 ABN
 which is a CON of 08/842,210 04/23/1997 PAT 5,868,698
 which is a CON of 08/648,356 05/14/1996 PAT 5,683,362
 which is a CON of 08/242,168 05/13/1994 PAT 5,547,469

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****
08/20/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and Acknowledged	/MANUEL A MENDEZ/ Examiner's Signature	<input type="checkbox"/> Met after Allowance	MA	5	16
		Initials			3

ADDRESS

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TITLE

Apparatus for performing diagnostic and therapeutic modalities in the biliary tree

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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